Chairman Larry E. Craig

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Senate Committee on Veterans' Affairs

April 27, 2006

VA Research: Investing Today to Guide Tomorrow's Treatment

Good morning, ladies and gentlemen. The Committee on Veterans' Affairs will now come to order.

Today's hearing will focus on an aspect of the Veterans Health Administration that often goes without the full measure of recognition it is due: the Medical and Prosthetic Research program. VA's research program encompasses bench science, clinical research, health services research, and rehabilitation research.

Together, these research activities have vastly contributed to the scientific knowledge base, led to the development of new medical technologies, and improved the delivery of health services at VA medical facilities across the country. VA research has played a major role in a number of historic breakthroughs: the first successful liver transplant, the development of the first cardiac pacemaker, and the technology that led to the development of the CT scan? to name a few.

Impressively, VA has accomplished all of this on a limited budget. Each year, direct appropriations for VA R&D are leveraged with NIH grant funding and resources from VA-affiliated nonprofits. Due in part to this maximization of research funds, the roughly \$400 million of annual appropriations for VA research bring about improvements for a \$34 billion health system.

As you know, this year's budget proposed a \$13 million reduction in VA research funding. With servicemembers returning from Iraq and Afghanistan with traumatic injuries and in need of innovative medical care, now is not the time to cut research funding.

I would like to thank the members of our Committee for joining me and Senator Akaka in writing a letter to the appropriators, urging them to overturn this reduction. We proposed that VA research be funded at \$432 million? a modest increase over last year's budget? to keep pace

with inflation and ensure that critical initiatives involving traumatic brain injury, spinal cord injury, and prosthetics are able to move forward.

Beyond addressing this year's budget, we must look ahead to the future of VA research. Many of the research facilities are in great need of repair and modernization. Researchers carry out their day-to-day activities while under serious space constraints and in outdated buildings? many of which are approaching a hundred years old. For example, in one site that is not fully equipped with modern air conditioning and ventilation systems, researchers opt to work at night so that extreme temperatures will not interfere with their results. There are limits to how long we can rely on early 20th century research facilities to yield cutting- edge 21st century discoveries.

However, there are also limits to the amount of funds Congress can provide. As part of our focus on infrastructure needs, it is important that we look for innovative ways for VA to enhance its existing relationships with universities. I am especially interested in exploring VA-university collaboration in the form of jointly operated research space.

Modern facilities are not just about attractive workspace for academics. One of the myriad ways that research benefits VA's health system is through the recruitment of physician-researchers. We will hear from our witnesses here today about how the shortage of modern research space is hindering recruitment of new physicians.

I want to be clear that this hearing, in my mind, is not about pointing out shortcomings and failures. It is about assessing our challenges for the future.

In fact, I commend VA for its remarkable record of research accomplishments in spite of some serious obstacles. This exciting work will be highlighted during VA Research Week, which will be held the second week of May. As one of the outcomes of this hearing, I hope that members of this Committee will make a point of touring the research space when making visits to their local VA facilities.

We are joined today by VA's Undersecretary for Health, Dr. Jonathan Perlin, who happens to be an academically trained researcher. He is accompanied by Dr. Joel Kupersmith, VA's Chief Research and Development Officer, and Dr. Richard Weir, who is a researcher at VA's Prosthetics Research Laboratory in Chicago.

Following their testimony, we will hear from four distinguished witnesses who are involved in VA research throughout the country. Dr. Fred Wright comes to us from the West Haven, Connecticut VA and Dr. Dennis Stevens is from the Boise, Idaho VA.

We will also hear from Dr. Jack Feussner, who is a former head of VA Research and currently chairs the Department of Medicine at the Medical University of South Carolina, and Dr. John Kennedy from the University of Alabama at Birmingham School of Medicine? who will be testifying on behalf of the Alliance for Academic Internal Medicine.

Gentlemen, thank you all for being here today. I look forward to your testimony.